

Republican bill would be the Profit Protection Act.

The worst aspect of this bill is that it allows the insurance companies, and not doctors and patients, to make medical choices. Remarkably, the Republican bill actually reaffirms the status quo and allows insurance company bureaucrats to decide what is medically necessary, so under the Republican plan, HMOs can define "medically necessary" any way they wanted. If you get sick and your insurance company decides the treatment you need is not medically necessary, you are simply out of luck.

This is, in my opinion, truly a sell-out of the highest proportions. It ignores the central catalyst of the whole managed care debate, the strongly held belief among Americans that medical decisions should be made by doctors and their patients.

The Democrats' Patient Bill of Rights, by contrast, insures that medical decisions would be made by doctors and patients. The Democratic bill defines "medically necessary care" based on the generally accepted principles of professional medical practice. What that means is that under the Democratic plan, patients and doctors determine what is the best course of treatment, not HMOs and insurance company bureaucrats.

The Republican bill also fails to ensure access to specialists. If your child gets an illness and you want to bring your son or child to a specialist, you cannot, under the Republican bill. You may not be able to go to that specialist, depending on what the insurance company decides. But the Patient Bill of Rights, the Democratic bill, guarantees patients access to specialists when such access is needed.

Another thing, the Republican plan does not even guarantee you full access to the nearest emergency room if you need emergency care, which has been a big issue during the course of this debate. The Republican bill includes a reasonable person's standard for access to emergency care, but it does not list severe pain as a reason why a person might determine that he or she needs to go to the emergency room.

I want to repeat that, because it is really kind of mind-boggling. Under the Republican plan, severe pain is not considered a symptom of a possible emergency. So that means if you are suffering from severe pain and you rush to the emergency room to receive treatment for a legitimate problem, your HMO can still refuse to pay for it.

The Democrats' Patient Bill of Rights also guarantees patients coverage if they go to an emergency room because they are suffering from severe pain. So regardless of the reason you go to the emergency room that is closest, if you get the emergency room care, the HMO has to pay for it.

The Republican bill is also a failure when it comes to gag clauses. This is particularly interesting, because we passed prohibitions on gag rules here in

the House of Representatives. But under the Republican bill, it would still allow a health plan to restrict communications between doctors and patients.

The Democrats, on the other hand, prohibit plans from gagging doctors to inform patients about treatment options that are not covered by their health plan, and protects providers from retribution by the HMO for telling their patients the truth.

When it comes to accountability, the GOP plan also is riddled with loopholes and omissions. The bill includes an external appeals process, but limits access to that process to individuals in plans under ERISA; in other words, only if your employer is self-insured. If you are covered by ERISA, you get the external review. Otherwise, you are out of luck.

Then finally, and I want to stress this, the GOP plan also denies patients the right to sue their HMOs if they are denied needed care. Again, the right to sue is an enforcement mechanism that is necessary if these patient protections really are going to be enforced.

The Democratic bill enforces all of the patient protections it provides by giving the patients the right to sue their HMO, and holding the HMOs accountable for the decisions they make. Again, this is an extremely important difference between the Democratic and the Republican plans.

CALLING FOR BIPARTISAN HEALTH CARE LEGISLATION, AND FOR SUPPORT OF THE MEEHAN-SHAYS CAMPAIGN FINANCE REFORM MEASURE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 21, 1997, the gentleman from Connecticut (Mr. SHAYS) is recognized during morning hour debates for 5 minutes.

Mr. SHAYS. Mr. Speaker, there is a Democrat health care bill and there is a Republican health care bill, but ultimately, if we are to have a bill, there will have to be a Republican and Democrat bill. I urge both sides on this issue, once the posturing of our various positions is known, to work in a bipartisan agreement to pass meaningful health care reform.

Mr. Speaker, I stand before the Members to thank this Chamber for its support for campaign finance reform legislation that is moving before the House; the Meehan-Shays bill as it is sometimes referred to, or McCain-Feingold.

We have had an extraordinary process that has allowed Members to debate this issue fairly extensively, and before last night we had 55 amendments. We have dealt with 20 of them. We dealt with the one that would have been a killer amendment, and I appreciate the House defeating it.

The bottom line to campaign finance reform is that we need to ban soft money, not just on the Federal level but on the State level, for Federal elec-

tions. Soft money are the unlimited sums that individuals, corporations, labor unions, and other interest groups give to the political parties, unlimited sums. They ultimately get rerouted right back to the candidates to help them in their election, making a mockery of our campaign finance laws.

The second major element, and the Meehan-Shays bill deals with soft money both on the Federal and State level, for Federal elections, it also deals with the sham issue ads and calls them what they are, campaign ads.

It does not mean that if it is a campaign ad, people do not have their voice. They just come under the campaign law. They have to disclose contributions. Contributions are limited but expenditures are not, because the Supreme Court has found that you cannot limit expenditures.

What we do is recognize that a sham issue ad that clearly is a campaign ad, 60 days prior to an election is a campaign ad if it mentions the name of the person or shows a picture or the name of the individual, and is intended to affect the election.

We also codify the court decision on Beck. That was the decision where an individual who was not a member of a union argued that he should not have to make political contributions in his agency fee to the union to be used for candidates that a person opposed. The court heard this case and determined that if you are not a member of a union, your money does not have to go for political purposes, and therefore, your agency fee is less than what the union fee would be.

We also significantly improve FEC disclosure and enforcement, particularly as it relates to disclosure. Any expenditure over \$1,000, 20 days to an election, has to be noted within 24 hours, and then is put on the Internet.

We require, and in terms of enforcement, we give the FEC the ability to dismiss cases that do not have any merit, and to take up cases more quickly that do, before an election, and we also provide for audits of campaign expenditures.

In addition, we make sure it is clear in the law that foreign money cannot be raised, and that we cannot raise money on government property. Members may think that is the law today, but soft money is not deemed campaign money, and therefore, does not come under the Pendleton Act.

So many have argued that they can accept soft money from foreigners, and on government property they can raise money. They do not want people to know they are doing this, because they know morally it is wrong, but legally and technically it is not. That is why we need to amend the law.

Mr. Speaker, we have, as I said earlier, 55 bills or amendments coming before this Chamber. We dealt with 20 last night. I would like to say that we have dealt with a few before. One of the things we are trying hard to do is, as both Republicans and Democrats, to find where we have common ground.

We found common ground with those who supported the commission bill, and urged them to vote against their own substitute commission bill, but then support the commission bill, attach it to our bill. Also the gentlewoman from Washington (Mrs. LINDA SMITH) took her 6 amendments last night and put them into one, and helped us write a better bill to guarantee, without question, and to satisfy those groups that are concerned, that voter guides are in fact legal and do not come under the campaign law.

There is no ambiguity on this issue. She wrote the law in a tough way. We accepted her six amendments into one, and thank her for her work in this area. She really has been a leader on campaign finance reform, and has played a tremendous role in helping us move this bill forward.

CALLING UPON HOUSE LEADERSHIP TO BRING FORWARD FOR DEBATE THE PATIENTS' BILL OF RIGHTS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 21, 1997, the gentlewoman from Michigan (Ms. STABENOW) is recognized during morning hour debates for until 9:50 a.m.

Ms. STABENOW. Mr. Speaker, this morning a hearing is being held by the Democratic Health Care Task Force on the critical issue of managed health care. We are going to hear this morning from families across the country who have been denied care, who have had very difficult situations occur because they have not had the opportunity to receive the care their doctor recommended because they are in a managed care system. We are going to hear from small businesspeople. We are going to hear from other Americans speaking out.

I only wish that we were doing this within the regular committee structure. I would call upon the House leadership this morning to bring forward the Patients' Bill of Rights, the comprehensive bill to protect American families, to bring it to a full hearing, to bring it to this House for a vote, because it is absolutely critical that in this day and age, when we have the best health care in the world, that we make sure our families can truly receive that care when in fact it is recommended by their physician or other health care provider.

What we are talking about today is a basic set of principles that will allow us as Americans to be sure that the quality of care that is available in this country is truly available to each of us. I would urge strongly that the leadership take this bill up immediately.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until 10 a.m.

Accordingly (at 9 o'clock and 50 minutes a.m.), the House stood in recess until 10 a.m.

AFTER RECESS

The recess having expired, the House was called to order by the Speaker at 10 a.m.

PRAYER

The Reverend Dr. Kevin Shrum, Pastor, Inglewood Baptist Church, Nashville, Tennessee, offered the following prayer:

Gracious Father, I humbly approach You today in the name of the one and only true God, our Lord and Savior, Jesus Christ. In His name and with the aid of the Holy Spirit, I ask for Your bountiful blessings and godly wisdom to anoint this law-making body in their daily tasks. For, Lord, great is their task in leading this Nation to honor its noble heritage and secure the possibilities of a future as one Nation under God. May we understand, as did President George Washington, that of all dispositions and habits which lead to political prosperity, religion and morality are indispensable supports.

Assist this esteemed assembly and our beloved Nation as a whole to honor Your justice, mercy and righteousness in all that we say and do. If godly righteousness exalts a Nation, then let us be that Nation that leads the nations in seeking Your righteous standards.

When we err, forgive us. If we succeed, let our successes honor You and humbly lead us to further successes. And may every action of this law-making body reflect the absolute character and gracious benevolence of Your biblical law and love. Ultimately may all that we do and say as a unified people bring glory and honor to You who is able to keep us from falling and not failing and to present us before His glorious presence without fault and great joy, to the only God our Savior be glory, majesty, power and authority, through Jesus Christ our Lord, I pray. Amen.

THE JOURNAL

The SPEAKER. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER. Will the gentleman from New Jersey (Mr. PAPPAS) come forward and lead the House in the Pledge of Allegiance.

Mr. PAPPAS led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

ANNOUNCEMENT BY THE SPEAKER

The SPEAKER. The Chair will recognize 15 one-minutes on each side.

WELCOME TO THE REVEREND DR. KEVIN SHRUM

(Mr. CLEMENT asked and was given permission to address the House for 1 minute.)

Mr. CLEMENT. Mr. Speaker, I stand to welcome Dr. Kevin Shrum to the Chamber of the U.S. House of Representatives and to thank him for opening our session today with a heartfelt prayer.

Dr. Shrum is a devout Christian and an inspiring pastor. His church is in Nashville, Tennessee. Inglewood Baptist Church is one of the fastest growing Southern Baptist churches in the Fifth Congressional District.

Dr. Shrum graduated with a bachelor of arts from Missouri Baptist College in 1984, received his master's of divinity in 1987 and earned his doctor of ministry in 1991 from the Southern Baptist Theological Seminary.

Dr. Shrum comes from a rich heritage of spiritual leaders. My administrative assistant Dottie Moore has been an active member of his church for many years. It is a great honor to have him with us today. God bless you.

TWINKLE, TWINKLE KENNETH STARR

(Mr. PAPPAS asked and was given permission to address the House for 1 minute.)

Mr. PAPPAS. Mr. Speaker, Twinkle, twinkle Kenneth Starr, Now we see how brave you are. Up above the Pentagon sting, Like a fair judge in the ring. Twinkle, twinkle Kenneth Starr, Now we see how brave you are. When subpoenas and lies are gone, When obstruction shines upon, Then you throw your trump cards down, Twinkle, twinkle all brought down. Twinkle, twinkle Kenneth Starr, Now we see how brave you are. Then the Congress in the dark Thanks you for your courage and spark; We could not see which way to go, If you did not lead us so. Twinkle, twinkle Kenneth Starr, Now we see how brave you are.

DEMOCRATIC PATIENTS' BILL OF RIGHTS

(Mr. ALLEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ALLEN. Mr. Speaker, in view of those last comments, I would point out that although we have investigations in this House galore, we have not had one hearing on the subject of managed care reform.

Health care financing is in transition and the shift to managed care has raised concerns about implications for